



COMBINED DECLARATION AND POWER OF ATTORNEY FOR

ATTORNEY'S DOCKET NUMBER

UTILITY PATENT APPLICATION				
As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated be I BELIEVE I AM THE ORIGINAL, FIRST AND SOLE INVENTOR ORIGINAL, FIRST AND JOINT INVENTOR (if plural names are I WHICH IS CLAIMED AND FOR WHICH A PATENT IS SOUGHT	(if only one name is listed below) OR AN isted below) OF THE SUBJET MATTER			
A METHOD AND AN ARRANGEMENT IN A MOBILE RADIO SYSTEM				
the specification of which				
(check one) 🗵 is attached her	eto,			
☐ was filed on	as			
Application No.				
Application No.	led on; (if applicable)			
HEREBY STATE THAT I HAVE REVIEWED AND UNDERSTIDENTIFIED SPECIFICATION, INCLUDING CLAIMS, AS AMENIABOVE;				
I ACKNOWLEDGE THE DUTY TO DISCLOSURE TO THE OFFICE MATERIAL TO PATENTABILITY AS DEFINED IN TITLE 3 § 1.56 (as amended effective March 16, 1992);				
I do not know and do not believe the said invention was ever know before my or our invention thereof, or patented or described in a my or our invention thereof or more than one year prior to said public use or on sale in the United States of America more than invention has not been patented or made the subject of an invention application in any country foreign to the United States of America representatives or assigns more than twelve months prior to said	any printed publication in any country before dapplication; that said invention was not in one year prior to said application; that said cor's certificate issued before the date of said a on any application filed by me or my legal			
I hereby claim foreign priority benefits under Title 35, United State application(s) for patent or inventor's certificate as indicated belo application for patent or inventor's certificate on this inventical application(s) on which priority is claimed:	w and have also identified below any foreign			



COMBINED DECLARATION AN	D POWER OF ATTORNEY		ATTORNEY'S DOCKET NUMBER				
COUNTRY/		DATE OF FILING					
INTERNATIONAL	APPLICATION NUMBER	(day, month, year)	PRIORITY CLAIMED				
SWEDEN	9802342-7	30 June 1998	X Yes No				
		 	YesNo				
			YesNo Yes No				
			Yes No				
L hereby appoint the following a	ttornove and agent(s) to process	the said application and to tran	sact all business in the Patent and				
	rewith and to file, prosecute and 46 Richard J. Moura		ection with international applications				
Stanley R. Moore 26,9		34,746					
H. Mathews Garland 19,12		37,751					
Gerald T. Welch 30,33		40,401					
Roger L. Maxwell 31,89 P. Weston Musseman, Jr. 31,69							
J. Kevein Gray 37,1							
Jeffrey E. Bacon 35,0							
Steven R. Greenfield 38,10							
André M. Szuwalski 35,7							
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Craig A. Hoertsten 38,9 and:	17						
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Address all telephone calls to:		at (214)855-4500				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowlege that willful false statement and the like so määe are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
FUEL NAME OF SOLE OR FIRS	T INVENTOR S	SIGNATURE	DATE				
HALL, Göran	[×	S= A	May 27, 1999				
RESIDENCE		mum	CITIZENSHIP				
Mogatan 55, SE-431 64 MÖLDA	L, SWEDEN		Swedish				
POST OFFICE ADDRESS Mogatan 55, SE-431 64 MÖLDAL, SWEDEN							
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KANNAS, Chris	×	174 100	フ May 27, 1999				
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COMBINED DECLARATION AND POWER OF ATTORNET			NUMBER			
FULL NAME OF FOURTH JOINT INVENTOR, IF ANY	SIGNATURE / //	71/	DATE			
SUNDELL, Hans-Olof	× Mans Mf - ff	W	May 27, 1999			
RESIDENCE ASSESSED ON THE PROPERTY OF THE PROP	7		TIZENSHIP			
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RESIDENCE		CI	TIZENSHIP			
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FULL NAME OF SIXTH JOINT INVENTOR, IF ANY	SIGNATURE		DATE			
RESIDENCE		CI	TIZENSHIP			
POST OFFICE ADDRESS						
FULL NAME OF SEVENTH JOINT INVENTOR, IF ANY	SIGNATURE		DATE			
RESIDENCE		CI	TIZENSHIP			
POST OFFICE ADDRESS		•				
FÜEL NAME OF EIGHTH JOINT INVENTOR, IF ANY	SIGNATURE		DATE			
RESIDENCE		CI	TIZENSHIP			
POST OFFICE ADDRESS						
FULL NAME OF NINTH JOINT INVENTOR, IF ANY	SIGNATURE		DATE			
RESIDENCE		CI	TIZENSHIP			
POST OFFICE ADDRESS						